

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Southern California Fund

ADDRESS (number and street)

555 S. Flower St., Suite 4210

Check if different
than previously
reported. (ACC)

Los Angeles

CA

90071

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00361410

3. IS THIS
REPORTNEW
(N)**OR**AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

David Gould

Signature of Treasurer

Electronically Filed by David Gould

Date

04

15

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Southern California Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		16911.30
(b) Cash on Hand at Beginning of Reporting Period	16911.30	
(c) Total Receipts (from Line 19)	15000.00	15000.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	31911.30	31911.30
7. Total Disbursements (from Line 31)	25639.67	25639.67
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6271.63	6271.63
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Southern California Fund

Report Covering the Period:

From:

M M D D Y Y W Y
0 1 0 1 2 0 0 8

To:

M M D D Y Y W Y
0 3 3 1 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5000.00	5000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	5000.00	5000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	10000.00	10000.00
(c) Other Political Committees (such as PACs)	15000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15000.00	15000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15000.00	15000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	9389.67	9389.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	9389.67	9389.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16250.00	16250.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	25639.67	25639.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25639.67	25639.67

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	15000.00	15000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15000.00	15000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9389.67	9389.67
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9389.67	9389.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Southern California Fund

A.

Full Name (Last, First, Middle Initial)

Kiran Choudhary

Mailing Address 25260 Jasmen Ranch

City

Stevenson Ranch

State

CA

Zip Code

91381

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kenpo Inc.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: C203

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 14

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Southern California Fund

A.

Full Name (Last, First, Middle Initial)

Carpenters' Legislative Improvement Committee

Mailing Address 101 Constitution Ave. NW 10th Fl

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00001016

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 0 8

Transaction ID: C202

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

I.B.E.W.-C.O.P.E.

Mailing Address 1125 15th Street, N.W.

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00027342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 0 8

Transaction ID: C204

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Southern California Fund

A.

Full Name (Last, First, Middle Initial)
Scott Abrams

Mailing Address 612 N. Orange Drive #8 .

City Los Angeles State CA Zip Code 90036

Purpose of Disbursement
Fundraiser Management Fee

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D481

Date of Disbursement

01 / 09 / 2008

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)
Scott Abrams

Mailing Address 612 N. Orange Drive #8 .

City Los Angeles State CA Zip Code 90036

Purpose of Disbursement
Fundraiser Management Fee

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D471

Date of Disbursement

02 / 05 / 2008

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)
David L. Gould Company

Mailing Address 555 South Flower St Suite 4210

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Filing Expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D472

Date of Disbursement

02 / 05 / 2008

Amount of Each Disbursement this Period

880.26

SUBTOTAL of Disbursements This Page (optional)

5880.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Southern California Fund

A. Full Name (Last, First, Middle Initial) David L. Gould Company	Transaction ID: D478 Date of Disbursement																				
Mailing Address 555 South Flower St Suite 4210	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	8												
City Los Angeles State CA Zip Code 90071	Amount of Each Disbursement this Period																				
Purpose of Disbursement Filing Expenses & Office Expenses Candidate Name	<table border="1"> <tr> <td colspan="10">335.44</td> </tr> </table>	335.44																			
335.44																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Fraioli & Associates	Transaction ID: D470 Date of Disbursement																				
Mailing Address 80 F Street, N.W., #804	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	1		2	0	0	8												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Management Fundraiser Fee & Expenses Candidate Name	<table border="1"> <tr> <td colspan="10">1007.88</td> </tr> </table>	1007.88																			
1007.88																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Fraioli & Associates	Transaction ID: D477 Date of Disbursement																				
Mailing Address 80 F Street, N.W., #804	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	8												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Management Fee Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2343.32

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
Southern California Fund

769.98

626.98

342.50

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Southern California Fund

A.

Full Name (Last, First, Middle Initial)

Citi Cards

Mailing Address P.O. Box 6407

City
The Lakes

State
NV

Zip Code
88901

Purpose of Disbursement
Credit Card Payment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D486

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	8

Amount of Each Disbursement this Period

53.61

SUBTOTAL of Disbursements This Page (optional)

53.61

TOTAL This Period (last page this line number only)

9389.67

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Southern California Fund

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D473

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12500.00

B. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D474

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Hillary Clinton For President

Mailing Address 1801 Avenue Of The Stars Suite 701

City Los Angeles State CA Zip Code 90067

Purpose of Disbursement
In Kind Given

Candidate Name
Hillary Clinton

Office Sought: ☐ House
☐ Senate
☒ President

State: District:

Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D485

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 14

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Southern California Fund

A. Full Name (Last, First, Middle Initial) Hilary Clinton For President	Transaction ID: D490 Date of Disbursement
Mailing Address 1801 Avenue Of The Stars Suite 701	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 9 / 2 0 0 8</div> </div>
City Los Angeles State CA Zip Code 90067	Amount of Each Disbursement this Period
Purpose of Disbursement In Kind Given	<div>198.50</div>
Candidate Name Hilary Clinton	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Hilary Clinton For President	Transaction ID: D492 Date of Disbursement
Mailing Address 1801 Avenue Of The Stars Suite 701	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 9 / 2 0 0 8</div> </div>
City Los Angeles State CA Zip Code 90067	Amount of Each Disbursement this Period
Purpose of Disbursement In Kind Given	<div>626.98</div>
Candidate Name Hilary Clinton	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Hilary Clinton For President	Transaction ID: D494 Date of Disbursement
Mailing Address 1801 Avenue Of The Stars Suite 701	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 9 / 2 0 0 8</div> </div>
City Los Angeles State CA Zip Code 90067	Amount of Each Disbursement this Period
Purpose of Disbursement In Kind Given	<div>143.00</div>
Candidate Name Hilary Clinton	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Southern California Fund

A.

Full Name (Last, First, Middle Initial)
Hillary Clinton For President

Mailing Address 1801 Avenue Of The Stars Suite 701

City State Zip Code
Los Angeles CA 90067

Purpose of Disbursement
In Kind Given

Candidate Name
Hillary Clinton

Office Sought: ☐ House
☐ Senate
☒ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D480

Date of Disbursement

/ /

Amount of Each Disbursement this Period

53.61

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Hillary Clinton For President

Mailing Address 1801 Avenue of the Stars Suite 701

City State Zip Code
Los Angeles CA 90067

Purpose of Disbursement

Candidate Name
Hillary Clinton

Office Sought: ☐ House
☐ Senate
☒ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District:

Transaction ID: D476

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Indiana Democratic Congressional Victory Fund

Mailing Address One N. Capitol Ave. Suite 200

City State Zip Code
Indianapolis IN 46204

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D475

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

16250.00